\mathbf{C}_{Q}^{Q}	R				-				293	9307	740	0640	
(\$\hat{O})	ე ს Form	,99 0- T	F	Exempt Orga	nization Bus	ine	ss Incon	ne T	ax Ref	turn	ОМ	B No 1545-0687	
	FOILE	-	_		nd proxy tax und				ux 110	410		2040	
-		~~	For cal	lendar year 2018 or other tax ye	ar beginning		, and endir	ng		DIL		2018	
	Depar	tment of the Treasury	•	Openit	o Public Inspection for								
		al Revenue Service	1(c)(3)	501(c)(3) Organizations Only								
	A L	Check box if address changed	Name of organization (Check box if name changed and see instructions.)									trust, see)	
		xempt under section	Print	PENINSULA S						•		7147825 Isiness activity code	
		X 501(a\dagged)3) 408(e) 220(e) Or Type Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 5030									e instruct		
		408A530(a)		City or town, state or pro-		r foreig	n postal code			45	453000		
	C Boo	ok value of all assets		F Group exemption numl		▶				1=-9			
	ate	4,299,5	58.	G Check organization typ		oration	n 501(d) trust		401(a) trus	t	Other trust	
7	H En			ition's unrelated trades or t		1	-	Describe :	the only (or 1	ırst) unrelat	ed		
20	`			EE STATEMENT			If o	nly one,	complete Pa	rts I-V. If mo	ore than	one,	
_	• des	scribe the first in the bl	lank spa	ice at the end of the previou	is sentence, complete Pa	rts I ar	nd II, complete a S	Schedule	M for each	additional tra	ade or		
_	bu:	siness, then complete	Parts III	-V.	-								
N			-	ooration a subsidiary in an a tifying number of the parer		t-subs	idiary controlled	group?		▶ □	Yes	X No	
\sim		e books are in care of		THE ORGANIZA				Telepho	one number	▶ 360	373	3-1446	
ANNED				de or Business Inc			(A) Incom			penses		(C) Net	
ş	1 a	Gross receipts or sale	s	0.					_				
₹	b	Less returns and allow	vances		c Balance	1c	_						
တ္တ	2	Cost of goods sold (S	chedule	A, line 7)		2							
•	3	Gross profit. Subtract	line 2 fr	rom line 1c		3							
		Capital gain net incom	•	•									
_	_ b	Net gain (loss) (Form	oss) (Form 4797, Part II, line 17) (attach Form 4797)										
ِيَ يَ	277	Capital loss deduction	for trus	sts		4c							
ر	5 5	• •	-	ship or an S corporation (a									
₹-	6	Rent income (Schedu				6							
<u>ئ</u>	₹ 7 ₹ 8	Unrelated debt-finance		, ,		7							
2				and rents from a controlled	- ' '	8						-	
ĩ				on 501(c)(7), (9), or (17) o	rganization (Schedule G)	9 5							
		Exploited exempt activ				10					+		
- }	` '	Advertising income (S Other income (See ins		•		11 12					+		
Cr.	·n	Total. Combine lines				13		0.			 		
. <u></u> .	Pa			ot Taken Elsewhei	e (See instructions fo		ations on deduc		-				
Rec ≅	٣	(Except for o	contribu	utions, deductions must	be directly connected	with	the unrelated b	ousiness	s income)				
	14	Compensation of off	icers, di	rectors, and trustees (Sche	dule K) RE	CE	IVED	1		14			
	15	Salaries and wages						1		15	<u> </u>		
	16	Repairs and mainten	ance		MAI C216	0 1 2	2020			16	<u> </u>		
	17	Bad debts			G WA	7 1 (0 2020 G	1		17	_		
	48	Interest (attach sche	dule) (se	ee instructions)						18			
•	α11 Ω130	Taxes and licenses			UG	JEI	N, UT			19			
	また			e instructions for limitation	rules)		l o	. l		20	' 	-	
	3 000000000000000000000000000000000000	Depreciation (attach		•			2						
	The Ceived in a parching Squan a	•	iiiiied ol	n Schedule A and elsewher	e on return		22	.d		22			
	3,5	Depletion Contributions to defe	arrad oc	mnaneation plans						23			
		Employee benefit pro		mpensanun pians						25			
	签案	Excess exempt expe		chedule I)						26	_		
	2 7 4	Excess readership co								27			
		Other deductions (at	•	•						28			
	2/2	Total deductions A		•						29		0.	
	30			ncome before net operating	loss deduction. Subtrac	t line 2	9 from line 13			30		0.	
	-						=						

31

32

0.

31

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

Form 990-T	(2018) PENINSULA SERVICES 23-714	17825	Page 2
Part I	II Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		
	lines 33 and 34	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	27	1,000.
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,	1	
	enter the smaller of zero or line 36	38	0.
Part I	V Tax Computation		
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)	39	0.
40	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 38 from:		
	Tax rate schedule or Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.
Part \			
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a		
b	Other credits (see instructions) 45b	7	
C	General business credit. Attach Form 3800	1	
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d	1	
_	Total credits Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	Other taxes, Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47	
48	Total tax Add lines 46 and 47 (see instructions)	48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
	Payments: A 2017 overpayment credited to 2018	10	
	2018 estimated tax payments 50b 50b 4,158	<u> </u>	
D	Tax deposited with Form 8868	-	
		1	
		┪ ┃	
e		 	
Ţ		1	
g	Other credits, adjustments, and payments: Form 2439 Form 4136 Other Total 50g		
		§1	4,158.
	Total payments. Add lines 50a through 50g Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ □	A2	<u> </u>
52 50		53	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	5,4	4,158.
54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded S	55	4,158.
Part \		1 20 1	#,IJO•
			Yes No
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		163 140
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		🔻
	here >		$- \frac{\mathbf{x}}{\mathbf{x}}$
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		├
	If "Yes," see instructions for other forms the organization may have to file.		
58	Enter the amount of tax-exempt interest received or accrued during the tax year > \$	vuladae and belie	of it is true
Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge or and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	,,,,eugo and belle	,, ,, 10 ude,
Here		•	ss this return with
11010		ne preparer show	1
		nstructions)?	Yes No
	This type property a maint	if PTIN	
Paid	self- employed		07050
Prepa	LARRY HURLEY, CPA JULY NUMBER 129/20		97252
Use C	only Firm's name ► HEARTHSTONE CPA GROUP P.S./ Firm's EIN ►	91-1	397083
	4312 KITSAP WAY, SUITE 102	260 172	4644
	Firm's address ► BREMERTON, WA 98312 Phone no.	<u> 360-479</u>	
823711 01	-09-19	For	m 990-T (2018)

Schedule A - Cost of Good	s Sold. Enter	method of inven	tory v	valuation > N/A					
1 Inventory at beginning of year 1				Inventory at end of year	ır		6		
2 Purchases	2	7	Cost of goods sold. St	ubtract i	ine 6				
3 Cost of labor	3]	from line 5. Enter here	and in F	Part I,		1		
4a Additional section 263A costs	ts line 2						7	<u> </u>	
(attach schedule)	4a	. = -	_ 8	Do the rules of section	with respect to		Yes	No	
 Other costs (attach schedule) 	4b	1	property produced or a	acquired	for resale) apply to				
5 Total. Add lines 1 through 4b	5		<u></u>	the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Pe	rsonal Property	Lease	ed With Real Pro	pert	y) 	
1 Description of property									
(1)									
(2)									
(3)									
(4)	.=								
		ed or accrued				2(a) Deductions directly	u conne	cted with the incom	eın
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for p	ersona	sonal property (if the percent I property exceeds 50% or if sed on profit or income)	age 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)									
(2)				_					
(3)						_			
(4)									
Total	0.	Total			0.]			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter >			0.	(b) Total deductions. Enter here and on page 1, Part I, line 8, column (B)	>		0.
Schedule E - Unrelated Del	ot-Financed	l Income (see	ınstru	ictions)					
			,	Gross income from		3 Deductions directly conto debt-finan			
1 Description of debt-fit	nanced property		'	or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction	
(1)									
(2)									
(3)									
(4)		•=							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	adjusted basis allocable to nced property n schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8 Allocable dedu (column 6 x total of 3(a) and 3(b)	columns	
(1)				%			1		
(2)				%					
(3)				%		_		•	
(4)			1	%					
					1	nter here and on page 1, Part I, line 7, column (A)		Enter here and on part I, line 7, colum	
Totals				•		0			0.
Total dividends-received deductions in	icluded in columr	18					•		0.

Schedule F - Interest	, ,	1			Controlled O		_		_ ,000 ,110		•	
1. Name of controlled organiz	zation	2. Emj identifii num	cation	3 Net unrelated income (loss) (see instructions)		4 To	4 Total of specified payments made		rt of column 4 ded in the cont zation's gross	rolling	6. Deductions directly connected with income in column 5	
(1)		 -	_									
(2)			_									
(3)			•				1				_	
(4)	_						!				•	
Nonexempt Controlled Orga	nızatıons					_	· . · .		<i>-</i> *, .	•	.	
7 Taxable Income		unrelated incon (see instructions		9. Total	of specified pays	ments	10 Part of colu in the control gros	imn 9 tha ling orga is income	nızatıon's	11 De with	eductions directly connected h income in column 10	
(1)				_								
(2)												
(3)								·				
(4)	<u> </u>											
							Add colu Enter here and line 8,		e 1, Part I,	l	dd columns 8 and 11 here and on page 1, Part I, line 8, column (B)	
Totals									0.		0	
Schedule G - Investm		me of a	Section	n 501(c)(7), (9), or	(17) O	rganizatio	n				
	structions)	come		-	2 Amount of	income	3 Deduction	ected	4. Set-	asides schedule)	5. Total deductions and set-asides	
(1)							(attach sche	dule)	(anson c		(col 3 plus col 4)	
(1)												
(2)				_		 						
(3)	·							<u> </u>				
(4)					Enter here and	on page 1					Enter here and on page	
					Part I, line 9, co						Part I, line 9, column (B)	
Totals				•		0.					0	
Schedule I - Exploite	d Exemp	t Activity	Incom	e, Other	Than Ac	vertis	ing Incom	е				
Description of exploited activity	2 unrelate	Gross d business me from r business	directly with pr of un	spenses connected roduction related as income	4 Net incon from unrelated business (co minus colum gain, comput through	d trade or plumn 2 in 3) If a e cols 5	5. Gross inc from activity is not unrela business inc	that ited	attribut	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)												
(2)												
(3)												
(4)				-								
	page	ere and on 1, Part I, 0, col (A)	page	ere and on 1, Part I, , col (B)							Enter here and on page 1, Part II, line 26	
Totals	<u> </u>	0.		<u> </u>							0	
Schedule J - Advertis												
Part I Income From	n Periodi	cals Rep	orted o	n a Con	solidated	Basis	•					
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs	or (loss) (c col 3) If a g	tising gain of 2 minus ain, compu hrough 7			6. Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)												
(2)												
(3)												
(4)												
		-										
Totals (carry to Part II, line (5))	<u> </u>		0.	0	•				<u> </u>		0	

Page 5

Form 990-T (2018) PENINSULA SERVICES

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical		2. Gross advertising income	3 Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)							
(4)		_					
Totals from Part I	▶	0.	0.				0
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	•	0.	0.				0

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)

23-7147825

PENINSULA SERVICES

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

NONE IN 2018 - SEE RELATED FOOTNOTE

TO FORM 990-T, PAGE 1

FOOTNOTES STATEMENT 2

THE TAXPAYER HAS DETERMINED UNDER REG. 1.513-1(D)(2) AND PLR 9150052 THAT ALL ACTIVITIES DURING 2018 WERE SUBSTANTIALLY RELATED TO THE EXERCISE OF THE ORGANIZATION'S CHARITABLE PURPOSE AND THEREFORE NOT SUBJECT TO UBI. THIS DETERMINATION WILL TAKE PLACE ON A YEAR BY YEAR BASIS IN FUTURE YEARS.